STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

J. NNF [m]

Date:

Permit #: Refund: Amount Paid: M 17-0338 20-17

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Bayfield Co. Zoning Depi

JW 122017

Value at Time of Completion * include donated time &	Non-Shoreland	☐ Shoreland —		Section <u>S</u>	NESW ANDSEIN	PROJECT LOCATION	Authorized Agent: (Pe	Contractor:	Address of Property:	Owner's Name:	TYPE OF PERMIT REQUESTED-	O NOT START CONSTRU
Project		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	Section 512, Township T46.1/N, Range R07 w		Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	***************************************	Address of Property: SEDNAMIK RO	Norhard allary PAHEVMANN 18468 BEDDANKRA MASON WI SYR	QUESTED—► □ LAND USE	30 NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
# of Stories and/or basement		iin 1000 feet of Lake, F	liver,	N, Range ROZ W	Gov't Lat Lot(s)				1 Ed a	VMANN /	UD USE □ SANITA	AVE BEEN ISSUED TO APP
t Use		Pond or Flowage If yescontinue	Stream (incl. Intermittent) If yes—continue —	Town	CSM Vol & Page	Tax ID# (4-5 digits)	Agent Phone: A	Contractor Phone: P	y/State/Zip: 54856	8468 RMAY	□ SANITARY □ PRIVY □	LICANT.
# bedrooms		Distance Structure	Distance Structure	De/tA	Lot(s) No.	2695	gent Mailing Address	Plumber:	6	WKRA MAS	CONDITIONAL US	
What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline :	Distance Structure is from Shoreline:	Lot Size	Block(s) No. Subdivision:	Recorded De	Agent Mailing Address (include City/State/Zip):			5 N W. 54	☐ CONDITIONAL USE ☐ SPECIAL USE	
/pe of ary System roperty?		□ Yes Ž×No	Is Property in Floodplain Zone?	,004 Acreage	ion:	Recorded Deed (i.e. # assigned by Register of Deeds) Document 1017 P 812	Written Author Attached Pes No	Plumber Phone	Cell Phone:		B.O.A	
Water		□ Yes X No	Are Wetlands Present?	40%		Register of Deeds)	Written Authorization Attached Nes No	hone:		715 7462662	THER	

Proposed Construction:	Existing Structure		,	50,	20,00	と変え	7		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)	- Constitution of the cons	Property	Run a Business on	☐ Relocate (existing bldg)	□ Conversion	☐ Addition/Alteration	☐ New Construction	Project
	or is relevant to it)		☐ Foundation	☐ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	- X-3-Story	# of Stories and/or basement
Length:	Lengin:						Year Round	□ Seasonal	Use
				X None		3	□ 2	⊢	# of bedrooms
Width: 30 Height:	Width: Height	NOR	Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type: Molan C	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
it: / 3	14:				00 gallon)	own ch	X Well	□ City	Water

Proposed Use イ	Proposed Structure	Dimensions	Square Footage
Rec'd for Issuance	Principal Structure (first structure on property)	(x)	
	Residence (i.e. cabin, hunting shack, etc.)	×	
	with Loft	(x)	
X Residential Use	with a Porch	(x)	
2000 photo contract	with (2 nd) Porch	(x)	
	with a Deck	(x)	
	with (2 nd) Deck	(x)	
☐ Commercial Use	with Attached Garage	(x)	
	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(x)	
	Mobile Home (manufactured date)	×	
	Addition/Alteration (specify)	×	American de l'american de la company de la c
Viunicipal Use	Accessory Building (specify) Pole Bullatha	(30 × 36)	1000
	Accessory Building Addition/Alteration (specify)	(×	,
	Special Use: (explain)	(x)	
	Conditional Use: (explain)	×	
	Other: (explain)	(x	

FAILURE TO OBTAIN A PERMIT OL STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in confit Tin application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any pasonable time for the purpose of inspection. Owner(s): / (If there are Multiple in Albaman Taller Taller Managery of authorization must accompany this application) 7 Date 6 is

Authorized Agent:

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line Condition(s): Town, Committee or Board Conditions Attached? Tyes TNO- (If No t) Issuance Information (County Use Only) Date of Inspection: Setback to Privy (Portable, Composting)

Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Granted by Variance (B.O.A.) Permit Denied (Date): Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Hold For Sanitary: Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Setback to Septic Tank or Holding Tank Was Parcel Legally Created Was Proposed Building Site Delineated Please complete (1) - (7) above (prior to continuing) r to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner or the other previously surveyed corner to the other previously surveyed corner. Or werlfable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be the box n Record of Inspector: 7-0000 (2) (3) (4) (5) (5) (7) Show any (*): Show any (*): Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W), Setbacks: (measured to the closest point) Show: Show: Show Location of (*): Show / Indicate: Show Location of: Description NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits. \mathbb{C}^{\times} Draw or Sketch your Property (regardless of what you are applying for) 6 Case #: 1009 7:00 □ Yes Hold For TBA: 2017 Yes No (Deed of Record) _____(Fused/Contiguous Lot(s)) Proposed Construction
North(N) on Plot Plan
(*) Driveway and (*) Frontage Road (Name Frontage Road)
(*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20% Spears Inspected by: Roa (60) Sanitary Number: Permit Date: Reason for Denial: 7/00 7100 Measurement 20/2 36x08 Hold For Affidavit: **9** a Feet Feet Feet Feet Feet Feet C 17. ٨ Previously Granted by Variance (B.O.A.) Mitigation Required Mitigation Attached ZUZ Setback from Wetland
20% Slope Area on property
Elevation of Floodplain Were Property Lines Represented by Owner
Was Property Surveyed Setback to Well Setback from the Lake (ordinary high-water mark)
Setback from the River, Stream, Creek
Setback from the Bank or Bluff 6 Doll Day Changes in plans must be approved by the Planning & Zoning Dept. 6/2 Hold For Fees: □ Yes Description CRAS Permi 石を A S BARRACKA Case #: Affidavit Required Affidavit Attached □ Yes Zoning District Lakes Classification Sanitary Date: Date of Re-Inspection: Date of Approval: MOUNC SYXEM Yes Measurement □ Yes 6 Š 33 22/1: 0 NO Feet Ro Feet Feet Feet

own, City, Village, State or Federal Permits May Also Be Required

I AND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Norbert & Mary Pattermann 17-0228 Issued To: No. Parcel in NE SE & Town of **Delta** 12 456 N. Range 7 W. SE Township Location: **NW** ½ of 1/4 Section CSM# Subdivision Block Gov't Lot Lot

For: Residential Accessory Structure: [1- Story; Pole Building (30' x 36') = 1,080 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

June 27, 2017

Date